

Animal Removal Authorization

We request approval to begin, reschedule or adjust numbers in gathers. We understand that funding will be distributed for removal costs based on the approved AWP. Please notify Fund For Animals in accordance with the court order.

State Office WH&B Program Lead, Administrative State _____

Name of Gather:.

List HMA's included:

This gather will go below AML_____ This gather will not go below AML_____

AML for each HMA:

Estimated Population:

Number to be gathered:

Number to be Removed:

Administrative Field Office:

Number to be Removed:

Scheduled Date to begin gather:

Anticipated Date of completion:

Operations cost estimate:

Action:.

Recommendation by WO-260:

Concurrence by AD-200: Agree _____*Date Signed*

Disagree _____*Date Signed*

Transmittal Date

WO-260

State Office WH&B Program Lead
cc: WO-220/WO-260
